FORM 4

Check this box if no longer subject to

Section 16. Form 4 or Form 5 obligations

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

may continue. See Instruction 1(b).
Check this box to indicate that a
transaction was made pursuant to a

contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

10b5-1(c). See In	struction 10.							
1. Name and Addre Swanson Jim		erson*	2. Issuer Name and Ticker or Trading Symbol <u>COLUMBIA SPORTSWEAR CO</u> [COLM]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) C/O COLUMBI	(First) IA SPORTSWE	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 02/29/2024	X Officer (give title below) EVP & Cl	Other (specify below)			
14375 NW SCII (Street)	ENCE PARK D	RIVE	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
PORTLAND	OR	97229			one reporting roteen			
(City)	(State)	(Zip)						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								

1. Title of Security (Instr. 3) 6. Ownership 7. Nature of 2. Transaction 2A. Deemed 4. Securities Acquired (A) or 5. Amount of Date Execution Date, Transaction Disposed Of (D) (Instr. 3, 4 and 5) Securities Form: Direct (D) Indirect (Month/Dav/Year) if anv Code (Instr. Beneficially Owned or Indirect (I) Beneficial Following Reported (Month/Day/Year) 8) (Instr. 4) Ownership Transaction(s) (Instr. 4) (A) or (D) (Instr. 3 and 4) Code v Amount Price

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8) Code (Instr. 6) 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Employee Stock Option (right to buy)	\$82.69	02/29/2024		A		10,038		(1)	02/28/2034	Common Stock	10,038	\$ 0	10,038	D	
Restricted Stock Units	(2)	02/29/2024		А		5,383		(3)	(3)	Common Stock	5,383	\$ <mark>0</mark>	5,383	D	

Explanation of Responses:

1. The option was granted for 10,038 shares on February 29, 2024 and becomes exercisable for 25% of the shares on each of the first four anniversaries of the grant date.

2. Restricted stock units convert to common stock on a one-for-one basis.

3. The grant of 5,383 restricted stock units vests at 25% annually beginning on March 1, 2025. If a vesting date falls on a day on which the securities exchange is closed, affected RSUs shall vest on the next securities exchange business day.

Remarks:

Christina A. Mecklenborg, Attorney-in-Fact ** Signature of Reporting Person

03/04/2024

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.